

Impacts of Incarceration on Health

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Research on the health impacts of incarceration on individuals' in-custody health is sparse and mixed, but the negative impact of incarceration on future health is well-documented and deleterious.

Wildeman, C., & Wang, E. A. (2017). Mass incarceration, public health, and widening inequality in the USA. *The Lancet*, 389(10077), 1464-1474.

- Impact of current incarceration: Although all-cause mortality rates decrease for Black people who are incarcerated (see study below), this is not true for other subpopulations. Additional research findings show worsening of depressive symptoms and life satisfaction while people are incarcerated, and outcomes are even worse for people placed in solitary confinement.
- Impact of past incarceration: Incarceration has direct impact on increases in chronic psychiatric disorders, such as major depressive disorder.
 - Additionally, even if people get care while incarcerated, this care often ends abruptly at release. People with chronic health conditions are rarely released with prescription medications or follow-up appointments, and many have co-occurring mental health disorders that interfere with getting care after incarceration.
 - People who are incarcerated encounter discrimination when looking for work and housing, and those with drug felonies cannot access public housing and food services.

People experience high rates of traumatic events during incarceration, including victimization, abuse, solitary confinement, and coercion, which are related to increases in PTSD symptoms.

Piper, A. & Berle, D. (2019). The association between trauma experienced during incarceration and PTSD outcomes: A systematic review and meta-analysis. *The Journal of Forensic Psychiatry & Psychology*, 30(5), 854-875.

- Review of six studies found significant association between traumatic events during incarceration and PTSD symptoms (correlation of 0.32, 95% CI: 0.25, 0.38, $p < 0.01$).
- Time incarcerated was not related to PTSD symptoms, suggesting that any time of incarceration is associated with increased rates of PTSD symptoms.

Overall, people releasing from prison have higher mortality rates than the general population. Black men who are incarcerated have *lower* mortality rates than the general population, white men have *higher* mortality rates during incarceration.

Spaulding, A. C., Seals, R. M., McCallum, V. A., Perez, S. D., Brzozowski, A. K., & Steenland, N. K. (2011). Prisoner survival inside and outside of the institution: implications for health-care planning. *American journal of epidemiology*, 173(5), 479-487.

- Sample of 23,510 people imprisoned in Georgia in 1991.
- Increased mortality after incarceration was largely related to HIV, cancer, cirrhosis, homicide, transportation, and accidental poisoning.
- Decreased mortality among Black men during incarceration was largely due to decreases in homicide, transportation, accidental poisoning, and suicide.

Incarceration and arrest are directly associated with poorer mental health even after controlling for other factors among a national sample.

Sugie, N. F. & Turney, K. (2017). Beyond incarceration: Criminal justice contact and mental health. *American Sociological Review*, 82(4), 719-743.

- National sample of 42,478 people participating in the National Longitudinal Survey of Youth from 2000 to 2010.
- Arrest showed the largest impact on poorer mental health, and incarceration also had a distinct negative effect.
- Models controlled for other factors such as age, marital status, children, education, employment, income, place of residence, and violence crime rate where they lived.

People are more likely to die in the two weeks following release than the general population, largely due to increased risk of drug overdose.

Binswanger, I. A., Blatchford, P. J., Mueller, S. R., & Stern, M. F. (2013). Mortality after prison release: opioid overdose and other causes of death, risk factors, and time trends from 1999 to 2009. *Annals of internal medicine*, 159(9), 592-600.

Binswanger, I. A., Stern, M. F., Deyo, R. A., Heagerty, P. J., Cheadle, A., Elmore, J. G., & Koepsell, T. D. (2007). Release from prison—a high risk of death for former inmates. *New England Journal of Medicine*, 356(2), 157-165.

O'Connor, A. W., Sears, J. M., & Fulton-Kehoe, D. (2022). Overdose and substance-related mortality after release from prison in Washington State: 2014–2019. *Drug and alcohol dependence*, 241, 109655.

- Results are replicated across decades and Washington State samples, finding people are at higher risk of drug overdose in the two weeks following release from prison than the general population.
- This analysis found increased risk for both opioid and methamphetamine overdose.

Healthcare received during incarceration is substandard and dehumanizing.

Norris, W. K., Allison, M. K., Fradley, M. F., & Zielinski, M. J. (2022). 'You're setting a lot of people up for failure': What formerly incarcerated women would tell healthcare decision makers. *Health & Justice*, 10(1), 1-10.

- Qualitative study of women incarcerated in a community corrections center in Arkansas.
- Themes regarding incarceration experiences included: a) We had experiences of poor physical healthcare in prison; b) More specialty care is needed in prison; and c) Healthcare providers treat women in prison poorly.
- Direct quote from study on experience during incarceration:
"It feels like it's ran by cold, callous, uncaring people who don't care if you live or die at all. It feels like the ones who do care can't do anything about it. The ones that are in charge don't care if you're alive or dead...And it's terrifying if you're in there ... what are you going to do? Who are you going to complain to? It's terrifying. And no one's going to ... you're helpless."

Washington ranks #4 in the country for jail in-custody deaths.

- Data come from 2019 from the Bureau of Justice Statistics:
<https://bjs.ojp.gov/content/pub/pdf/mlj0019st.pdf>
- Reported in Seattle Times: <https://www.seattletimes.com/seattle-news/times-watchdog/wa-jails-have-among-the-highest-death-rates-in-the-country-why-dont-we-know-more-about-them/>

Washington State jails are struggling to adequately care for people who use fentanyl and other drugs.

- As reported by jails partnering with ADAI who are implementing medications for opioid use disorder programs.
 - "We saw a cluster of six fentanyl overdoses the other week" (Jail lieutenant, personal communication, 2023).
 - "We only have a medical provider here a few hours a week" (Jail superintendent, personal communication, 2023).
 - "We don't have enough nurses to observe everyone coming in on buprenorphine" (Prison prescriber, personal communication, 2022).

I needed a break from my addiction, but jail was not helpful for me – it was traumatizing.

...

I am opting out of drug court today, kinda scary but I've reached my limit of stress and anxiety that I can take.

Woman in early recovery from opioid use disorder, rural Washington